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February 20, 2007

Testimony of Edward Mattison  
In Opposition to  
Proposed Bill #666

***AN ACT CONCERNING SAFE RESIDENTIAL TREATMENT FACILITIES FOR  
EFFECTIVE RECOVERY.***

Thank you for the opportunity to speak on a matter of the greatest public importance. My name is Edward Mattison. I am the Director of the South Central Behavioral Health Network, which was the organizer and coordinator of the 43 sober houses in Region II that participated in the DMHAS Access to Recovery program. As an attorney, I have also litigated several federal cases on behalf of sober houses.

I am, however, also an alderman in the City of New Haven, Chair of the Community Development Committee and one of the lead authors of the amendments to New Haven's Zoning Code that authorizes and regulates sober housing. We had a great deal of public input into these amendments and I am more than aware of neighborhood concerns.

Let me begin by telling you that my 35 years of experience in this field has convinced me that a period in a sober house is the most effective technique we have for helping people who have become entangled with alcohol and drugs. The fact that everyone in the house is also struggling to remain sober is of incalculable benefit. The most important fact about sobriety is that the longer a person is connected to care, the more likely is his or her continued ability to avoid relapse. Sober houses are not treatment centers. They provide a sober living environment, encourage treatment and attendance at AA and similar meetings and require random drug tests to make sure everyone is continuing in sobriety. Many sober houses, following the Oxford Model, are completely run by the residents. Others have a manager, usually a person in recovery, who monitors and supervises the houses and counsels the residents.

It was in recognition of the success of the sober house environment that led Congress to pass the 1988 amendments to the Americans with Disabilities Act that provides legal protections to efforts by individuals in recovery to live together as a family in order to protect their sobriety. The federal courts have consistently held, following the U.S. Supreme Court decision in the

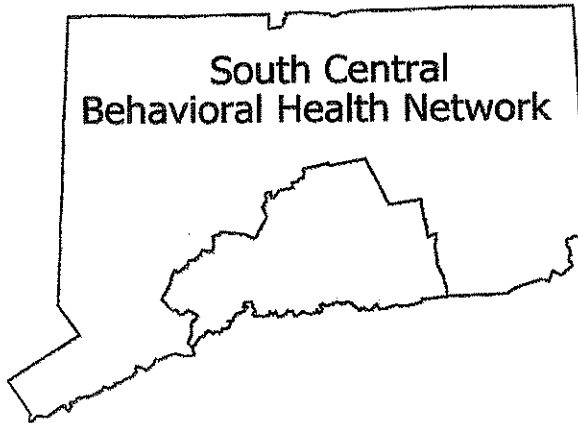
Edmonds case, that local laws that burden sober houses more than other family living situations may not be enforced.

Frankly, although Bill #666 has not yet been fully drafted, it is hard to avoid a concern that it may pass over the line established by Congress. It appears to create some sort of licensing arrangement that is completely alien to any notion of individuals living in a family environment. It may also unintentionally have the opposite effect from what is intended. Presently, DMHAS conducts an extensive evaluation of all sober houses that wish to participate in any of its programs. It is also very responsive to complaints by residents and neighbors about any kinds of problems that may arise. But, many sober houses can be fully self-supporting from payments by their residents. If participating in public programs becomes too onerous, houses that can may choose to operate wholly without DMHAS subsidies thus losing all public control over their actions.

Many houses, however, confronted with the complexity that inevitably follows from licensing, will simply go out of business. But the people who need them will not disappear. I have spent much time lately encouraging the creation of sober houses in suburban neighborhoods and meeting a great deal of resistance from residents. Yet, I see their children in the sober houses we have now. All of us are astonished at the denial we see all around us. The number of ordinary young people who get involved in serious drinking or prescription drug abuse is staggering. These are all of our children and sober houses have a lot to offer them.

We will not deny that there are a small minority of sober houses that are really unlicensed rooming houses, in which there is no attempt to ensure sobriety and residents are free to do as they wish. We also are working toward ways of separating these places from legitimate houses. We think DMHAS has been very effective in choosing only those houses to fund which are completely above board. We would be eager to work with any interested group to improve our standards, our ability to monitor and to develop tools to assist local authorities in forcing rooming houses to comply with the law.

But we are not at all ready for legislation. We don't know enough about what needs to be done to write it into legislation now. Many of our sober houses are valued parts of their communities. We can't lose them to hasty responses to very rare circumstances of house operators not meeting their responsibilities. We look forward to working with you to find a solution to the problems we know exist, without destroying an extraordinarily valuable social service.



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